



Under the Paper Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/905,356	
	Filing Date	07/13/2001	
	First Named Inventor	Deguchi	
	Group Art Unit	3621	
	Examiner Name	Backer	
Total Number of Pages in This Submission		Attorney Docket Number	Sony-02400

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Revocation of Power of Attorney <input type="checkbox"/> Power of Attorney with Change of Correspondence Address <input type="checkbox"/> Statement Under 37 CFR 3.73(b) for Sony Electronics <input type="checkbox"/> Statement Under 37 CFR 3.73(b) for Sony Corporation <input type="checkbox"/> Copy of the Assignment <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input checked="" type="checkbox"/> Postcard <input type="checkbox"/> Authorization from Mr. Leshner <input checked="" type="checkbox"/> RCE Transmittal Form <input checked="" type="checkbox"/> Copy of Previously Filed Amendment /Response <input type="checkbox"/> Fee Transmittal <input checked="" type="checkbox"/> Credit Card Authorization for \$880.00 <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request of Refund	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Executed Declaration <input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below): <div>Ext. of Time</div>
Remarks The Commissioner is hereby authorized to charge any additional fees associated with this communication or credit overpayment to Deposit Account No: 50-1963. A duplicate copy of this authorization is enclosed.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Richard H. Butler
Signature	
Date	07/30/2004

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Mail Stop RCE, Commissioner for Patents, PO Box 1450, Alexandria, VA 22313 on this date:			07/30/2004
Type or printed name	Richard H. Butler		
Signature		Date	07/30/2004

SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.